

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
97 Sandra B. Mortham
Secretary of State
A/12 DIVISION OF CORPORATIONS



FILED

97 DEC 29 AM 10:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J14881**

1. Corporation Name

H.L. CHASON, INC.

Principal Place of Business

~~ROBERT S. COHEN~~
~~306 N MONROE STREET, P O BOX 10095~~
~~TALLAHASSEE FL 32301~~

Mailing Address

~~ROBERT S. COHEN~~
~~306 N MONROE STREET, P O BOX 10095~~
~~TALLAHASSEE FL 32301~~



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

The Frame Up
Suite, Apt. #, etc.
1500 Apalachee Pkwy
City & State
Tallahassee, Fla.
Zip
32301 Country

3. New Mailing Office Address, If Applicable

The Frame Up
Suite, Apt. #, etc.
1500 Apalachee Pkwy
City & State
Tallahassee, Fla.
Zip
32301 Country

4. Date Incorporated or Qualified To Do Business in Florida

05/19/1986

5. FEI Number

59-2686709

Applied For
Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PTG	CHASON, HUBERT L., JR.	1500 APALACHEE PKWY.	TALLAHASSEE FL 32301
D	CHASON, HUBERT L., JR.	1500 APALACHEE PKWY.	TALLAHASSEE FL 32301
D, P, T, S	HUGHES, STEVEN W	1500 APALACHEE PKWY.	TALLAHASSEE FL 32301

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-12/30/97--01007--003
*****173.75 ***173.75**

12-29-97

8. Name and Address of Current Registered Agent

~~COHEN, ROBERT S.~~
~~306 N MONROE STREET~~
~~TALLAHASSEE FL 32301~~

9. Name and Address of New Registered Agent

Name Steven W. Hughes
Street Address (P.O. Box Number is Not Acceptable)
The Frame Up
Suite, Apt. #, Etc.
1500 Apalachee Pkwy
City
Tallahassee

State **FL** Zip Code **32301**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Steven W. Hughes
REGISTERED AGENT MUST SIGN

Date **12/29/97**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven W. Hughes

12-28-97
Date

(850)877-0950
Daytime Phone #

To Whom it May Concern,

(2)

I am writing to state that I did not receive the first notice for the filing of my corporation.

and second notice

Sincerely,

Stanley Hughes

H.L. Chason, Inc.

59-2686709